



69-05-03

GPO/1635

EXPRESS MAIL NO. EV336613357US

PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → 

Approved for use through 10/31/2002 OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(To be used for all correspondence  
after initial filing)

Application Number	09/696,867
Filing Date	October 25, 2000
First Named Inventor	Mary E. Brunkow
Group Art Unit	1636
Examiner Name	Sumesh Kaushal
Attorney Docket No.	240083.501D6

## ENCLOSURES (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> <b>Amendment/Response</b><br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement; Form PTO-1449<br><input type="checkbox"/> Cited References<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input checked="" type="checkbox"/> <b>Formal Drawing(s)</b><br><input type="checkbox"/> Request for Corrected Filing Receipt<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Declaration<br><input type="checkbox"/> Statement under 37 CFR 3.73(b)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund | <input type="checkbox"/> CD(s), Number of CD(s) _____<br><input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> <b>Return Receipt Postcard</b><br><input type="checkbox"/> Additional Enclosure(s) (please identify below):<br><hr/> <hr/> <hr/> |
|---|--|---|

Remarks Applicants respectfully submit 11 sheets of Formal Drawings, Figures 1A - 10

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Mae Joanne Rosok Reg. No. 48,903	Customer Number <b>00500</b>
Signature	<i>Mae Joanne Rosok</i>	
Date	September 3, 2003	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date specified below.

Typed or printed name		
Signature		Date: